

**Fill in this information to identify the case**

Debtor name Smokinkwr LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number 21-33989  
(if known)

☐ Check if this is an amended filing

**Official Form 206A/B**

**Schedule A/B: Assets -- Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**2. Cash on hand**

\$9,247.00

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**3.1. Checking Accounts-See Attached List**

Checking account

(\$39,115.30)

**4. Other cash equivalents (Identify all)**

Name of institution (bank or brokerage firm)

**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**(\$29,868.30)**

**Part 2: Deposits and prepayments**

**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes. Fill in the information below.

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Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989**Current value of  
debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**7.1. See attached List of Security Deposits****\$29,103.71****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$29,103.71****Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of  
debtor's interest**11. Accounts receivable**11a. 90 days old or less: \$208,391.54 — \$0.00 = ..... → \$208,391.54  
face amount doubtful or uncollectible accounts11b. Over 90 days old: \$0.00 — \$0.00 = ..... → \$0.00  
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$208,391.54****Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.Valuation method  
used for current valueCurrent value of  
debtor's interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

**\$0.00****Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**☐ No. Go to Part 6.☒ Yes. Fill in the information below.DS  
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Debtor <b>Smokinkwr LLC</b>	Case number (if known) <b>21-33989</b>
Name _____	

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
<b>Store Inventory-See Attached</b>			<b>Debtor's Estimate</b>	<b>\$62,688.56</b>
23. Total of Part 5				<b>\$62,688.56</b>
Add lines 19 through 22. Copy the total to line 84.				
24. Is any of the property listed in Part 5 perishable?				
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes				
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____				
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

### Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6.			<b>\$0.00</b>
Add lines 28 through 32. Copy the total to line 85.			
34. Is the debtor a member of an agricultural cooperative?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes			

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Debtor **Smokinkwr LLC** Case number (if known) **21-33989**  
Name

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?
- ☐ No  
☐ Yes

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?
- ☒ No. Go to Part 8.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			<div>\$0.00</div>

44. Is a depreciation schedule available for any of the property listed in Part 7?
- ☐ No  
☐ Yes
45. Has any of the property listed in Part 7 been appraised by a professional within the last year?
- ☐ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?
- ☐ No. Go to Part 9.  
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
Restaurant Machinery & Equipment: \$485,642.99 Furniture & Fiextures: \$201,825.00			
See Attached List	Debtor's Estiamte		\$687,467.99
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			<div>\$687,467.99</div>

Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No  
☐ Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 9: Real property****54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.  
☒ Yes. Fill in the information below.

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1.	<b>Store 0978</b> <b>6184 Hwy 6 N, Houston, TX 77084</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.2.	<b>Store 1607</b> <b>11401 Broadway St, #107, Pearland, TX 77584</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.3.	<b>Store 2034</b> <b>17045 Stuebner Airline Rd, Spring, TX 77379</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.4.	<b>Store 1379</b> <b>9440 Shady Dr, Houston, TX 77016</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.5.	<b>Store 0774</b> <b>532 Kingwood Dr, Kingwood, TX 77339</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.6.	<b>Store 0003</b> <b>2469 Dalworth St, Grand Prairie, TX 75050</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.7.	<b>Store 0347</b> <b>251 SW Wilshire Blvd, #126, Burleson, TX 76028</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.8.	<b>Store 1748</b> <b>3807 E Broad St, Mansfield, TX 76063</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.9.	<b>Store 1750</b> <b>6608 Gulf Fwy, #700, La Marque, TX 77568</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.10.	<b>Store 0087</b> <b>3711 Belt Line Rd, Addison, TX 75001</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>
55.11.	<b>Store 0426</b> <b>6065 Sports Village Rd, Frisco, TX 75033</b>	<b>Commercial Lease</b>	<b>\$0.00</b>	<b>Debtor's Estimate</b>	<b>\$0.00</b>

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Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989**55.12. **Store 2030****5832 Fairdale Lane, Houston, TX  
77057****Commercial Lease****\$0.00****Debtor's Estimate****\$0.00**56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

**\$0.00**57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10: Intangibles and Intellectual Property**59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.  
☐ Yes. Fill in the information below.

**General description****Net book value of  
debtor's interest  
(Where available)****Valuation method  
used for current value****Current value of  
debtor's interest**60. **Patents, copyrights, trademarks, and trade secrets**61. **Internet domain names and websites**62. **Licenses, franchises, and royalties**63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

**\$0.00**67. **Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**

- ☐ No  
☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☐ No  
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes. Fill in the information below.

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Debtor **Smokinkwr LLC**  
Name

Case number (if known) **21-33989**

Current value of  
debtor's interest

**71. Notes receivable**

Description (include name of obligor)

**72. Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

**73. Interests in insurance policies or annuities**

**74. Causes of action against third parties (whether or not a lawsuit has been filed)**

**75. Other contingent and unliquidated claims or causes of action of every nature,  
including counterclaims of the debtor and rights to set off claims**

**76. Trusts, equitable or future interests in property**

**77. Other property of any kind not already listed** *Examples: Season tickets, country club membership*

**78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$0.00**

**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

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Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>(\$29,868.30)</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$29,103.71</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$208,391.54</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$62,688.56</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$687,467.99</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+\$0.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$957,783.50</u>	91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....	<u>\$957,783.50</u>	

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## SMOKINKWR LLC dba DICKEYS BARBECUE PIT

### Bank Accounts

Account #	Account	Last 4 digits	Type	Detail type	Description	Balance
1000	Susser Bank Main Operating	2764	Bank	Checking		2,194.34
1100	Chase Main Operating (5695)	5695	Bank	Checking		-42,700.80
1105	Payroll Chase Bank	0722	Bank	Checking		0.00
1106	Payroll Susser Bank	3473	Bank	Checking		-2,878.88
1110	CHASE BUS PREM SAV (3723)	3723	Bank	Savings		7.18
1115	TX-0774 Kingwood Chase	6303	Bank	Checking		0.00
1120	TX-0978 Hwy 6 Chase	1152	Bank	Checking		0.00
1125	TX-1379 Shady Chase	0698	Bank	Checking		0.00
1130	TX-1607 Pearland Chase	1160	Bank	Checking		0.00
1131	TX-0347 Burleson Chase	2651	Bank	Checking		0.00
1132	TX-0003 Grand Prairie Chase	2669	Bank	Checking		0.00
1133	TX-1748 Mansfield Chase	2677	Bank	Checking		0.00
1134	TX-0087 Addison Chase	2685	Bank	Checking		0.00
1135	TX-2034 Spring Chase	0730	Bank	Checking		0.00
1136	TX-1750 LaMarque Chase	2701	Bank	Checking		0.00
1150	TX-0978 Hwy 6 Susser	3499	Bank	Checking		0.00
1151	TX-0774 Kingwood Susser	3739	Bank	Checking		0.00
1152	TX-2034 Spring Susser	3663	Bank	Checking		0.00
1153	TX-1607 Pearland Susser	3689	Bank	Checking		0.00
1154	TX-1379 Shady Susser	3721	Bank	Checking		0.00
1155	TX-1750 LaMarque Susser	3705	Bank	Checking		0.00
1156	TX-1748 Mansfield Susser	3614	Bank	Checking		0.00
1157	TX-0087 Addison Susser	3531	Bank	Checking		0.00
1158	TX-0426 Frisco Susser	3515	Bank	Checking		0.00
1159	TX-0347 Burleson Susser	3788	Bank	Checking		0.00
1160	TX-0003 Grand Prairie Susser	3630	Bank	Checking		0.00
1161	TX-1899 Food Truck Susser	4349	Bank	Checking		0.00
1162	TX-2030 Ghost Susser	4380	Bank	Checking		0.00
1163	Checking-3028 Susser	3028	Bank	Checking		0.00
1175	Petty Cash-Stores Bank		Bank	Cash on hand		9,247.00
	Square Online		Bank			4,262.86

<b>Total</b>	<b>(29,868.30)</b>
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Saturday, Jan 08, 2022 09:56:50 AM GMT-8

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## Dickeys Barbecue Pit

**1700 Security Deposits Ending Balance: \$29,103.71**

Date	Ref No.	Payee	Memo	Class	Decrease	Increase	Stat	Balance
	Type	Account		Store			Auto	
08/03/2021		Armish LLC	6th Installment Payment for Rent	TX-0426 Frisco		\$1,037.00		\$29,103.71
	Expense	1100 Chase Main Operating (5695)						
06/14/2021		Armish LLC	5th Installment for Security Deposit	TX-0426 Frisco		\$1,037.00		\$28,066.71
	Expense	1000 Susser Bank Main Operating						
04/19/2021		Armish LLC	4th Installment for Security Deposit	TX-0426 Frisco		\$1,037.00		\$27,029.71
	Expense	1000 Susser Bank Main Operating						
04/12/2021		Town of Addison	CONS COLL TOWN OF ADDISON PPD	TX-0087 Addison		\$750.00		\$25,992.71
	Expense	1000 Susser Bank Main Operating						
03/25/2021	0183	Armish LLC		TX-0426 Frisco		\$1,037.00		\$25,242.71
	Bill	2100 Accounts Payable (A/P)						
03/22/2021		Remington Addison Plaza, LLC		TX-0087 Addison		\$1,525.71		\$24,205.71
	Bill	2100 Accounts Payable (A/P)						
02/27/2021	0182	Armish LLC	Deposit March 2021	TX-0426 Frisco		\$1,037.00		\$22,680.00
	Bill	2100 Accounts Payable (A/P)						
01/27/2021	0177	Armish LLC	February 2021	TX-0426 Frisco		\$1,037.00		\$21,643.00
	Bill	2100 Accounts Payable (A/P)						
12/28/2020	10438	R.B.A.S Properties III		TX-0347 Burleson		\$2,900.00		\$20,606.00
	Check	1100 Chase Main Operating (5695)						
09/23/2020	10323	Theiss Investments LLC	Security Deposit for Dickeys TX2034	TX-2034 Spring		\$5,000.00		\$17,706.00
	Check	1100 Chase Main Operating (5695)		Dickeys TX-2034				
08/18/2020	10125	Kleinwood M.U.D.	Water Deposit	TX-2034 Spring		\$700.00		\$12,706.00
	Check	1100 Chase Main Operating (5695)		Dickeys TX-2034				
07/01/2020	5	TAALVI LLC	Check # 1032 Security Deposit			\$12,006.00		\$12,006.00
	Journal	-Split-		Dickeys TX-1607				

## 22. Inventory

### SMOKINKWR LLC Store Inventory

14-Dec-21

TX-0978	\$4,525.38
TX-0774	\$4,898.07
TX-1607	\$4,675.89
TX-1379	\$5,076.56
TX-2030	\$3,689.56
TX-2034	\$8,128.79
TX-1748	\$3,833.92
TX-1750	\$4,141.05
TX-0347	\$3,869.36
TX-0426	\$1,275.25
TX-0087	\$4,143.37
TX-0675	\$4,657.64
TX-0774	\$4,898.07
TX-0003	\$4,125.40
TX-1899	\$750.25

Total	\$62,688.56
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# 50. Restaurant Machinery & Equipment

## SMOKINKWR LLC

### Total Asset List For All Stores

#### Section 3 - Machinery & Equipment

1	Smoker	124,600.00
2	Hood	44,000.00
3	Walk-in Refrigerator	27,500.00
4	Clymate IQ Heated Cab	31,100.00
5	Nugget Ice Maker	22,300.00
6	Restaurant Equipment	180,842.99
7	Serving Line	31,600.00
8	Beverage Bar	16,700.00
9	Technology In a Box (TIB)	7,000.00
	<b>Machinery &amp; Equipment (Sub-total)</b>	<b>485,642.99</b>

#### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	201,825.00
	<b>Leasehold Improvements/Misc. Property</b>		<b>201,825.00</b>

**Total Assests** **687,467.99**



# 50. Restaurant Machinery & Equipment

## TX-0003

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,500.00
2	Hood	2018	3,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Cab	2018	3,600.00
5	Nugget Ice Maker	2018	2,500.00
6	Restaurant Equipment	2018	12,500.00
7	Serving Line	2018	1,500.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (TIB)	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b><u>35,600.00</u></b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	9,500.00
<b>Leasehold Improvements/Misc. Property</b>			<b><u>9,500.00</u></b>

**Total Assests** **45,100.00**

## 50. Restaurant Machinery & Equipment

TX-0087

### Section 3 - Machinery & Equipment

1	Smoker	2018	8,900.00
2	Hood	2018	4,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	2,500.00
5	Nugget Ice Maker	2018	2,500.00
6	Restaurant Equipment	2018	12,000.00
7	Serving Line	2018	3,500.00
8	Beverage Bar	2018	2,500.00
9	Technology In a Box (T	2018	500.00
Machinery & Equipment (Sub-total)			<u><u>39,400.00</u></u>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	<u>7,800.00</u>
Leasehold Improvements/Misc. Property			<u><u>7,800.00</u></u>

**Total Assests** **47,200.00**

## 50. Restaurant Machinery & Equipment

TX-0347

### Section 3 - Machinery & Equipment

1	Smoker	2018	2,500.00
2	Hood	2018	2,500.00
3	Walk-in Refrigerator	2018	1,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	800.00
6	Restaurant Equipment	2018	12,500.00
7	Serving Line	2018	2,500.00
8	Beverage Bar	2018	500.00
9	Technology In a Box (T	2018	500.00
Machinery & Equipment (Sub-total)			<u>24,800.00</u>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	7,965.00
Leasehold Improvements/Misc. Property			<u>7,965.00</u>

**Total Assests** **32,765.00**

# 50. Restaurant Machinery & Equipment

## TX-0426

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,500.00
2	Hood	2018	4,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Cab	2018	1,500.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	12,500.00
7	Serving Line	2018	3,600.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (TIB	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b>35,600.00</b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	8,500.00
<b>Leasehold Improvements/Misc. Property</b>			<b>8,500.00</b>

<b>Total Assests</b>	<b>44,100.00</b>
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## 50. Restaurant Machinery & Equipment

TX-0675

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,800.00
2	Hood	2018	2,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	12,500.00
7	Serving Line	2018	1,500.00
8	Beverage Bar	2018	1,200.00
9	Technology In a Box (T	2018	500.00
Machinery & Equipment (Sub-total)			<u><u>31,500.00</u></u>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	15,650.00
Leasehold Improvements/Misc. Property			<u><u>15,650.00</u></u>

**Total Assests** **47,150.00**

# 50. Restaurant Machinery & Equipment

## TX-0774

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,500.00
2	Hood	2018	5,400.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	8,500.00
7	Serving Line	2018	3,500.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b><u>32,400.00</u></b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	9,800.00
<b>Leasehold Improvements/Misc. Property</b>			<b><u>9,800.00</u></b>

<b>Total Assests</b>	<b>42,200.00</b>
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# 50. Restaurant Machinery & Equipment

## TX-0978

### Section 3 - Machinery & Equipment

1	Smoker	2018	12,500.00
2	Hood	2018	5,200.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	-
6	Restaurant Equipment	2018	11,500.00
7	Serving Line	2018	500.00
8	Beverage Bar	2018	500.00
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b>34,700.00</b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	26,520.00
<b>Leasehold Improvements/Misc. Property</b>			<b>11,500.00</b>

<b>Total Assests</b>	<b>46,200.00</b>
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## 50. Restaurant Machinery & Equipment

TX-1379

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,800.00
2	Hood	2018	5,400.00
3	Walk-in Refrigerator	2018	3,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	-
6	Restaurant Equipment	2018	7,800.00
7	Serving Line	2018	3,500.00
8	Beverage Bar	2018	-
9	Technology In a Box (T	2018	500.00
Machinery & Equipment (Sub-total)			<u><u>30,000.00</u></u>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	<u>7,500.00</u>
Leasehold Improvements/Misc. Property			<u><u>7,500.00</u></u>

**Total Assests** **37,500.00**

## 50. Restaurant Machinery & Equipment

TX-1607

### Section 3 - Machinery & Equipment

1	Smoker	2018	9,800.00
2	Hood	2018	3,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	3,000.00
6	Restaurant Equipment	2018	18,442.99
7	Serving Line	2018	3,500.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b><u>44,242.99</u></b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	15,500.00
<b>Leasehold Improvements/Misc. Property</b>			<b><u>15,500.00</u></b>

**Total Assests** **59,742.99**

# 50. Restaurant Machinery & Equipment

## TX-1748

### Section 3 - Machinery & Equipment

1	Smoker	2018	12,000.00
2	Hood	2018	3,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	1,500.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	8,600.00
7	Serving Line	2018	3,500.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b>35,100.00</b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	12,600.00
<b>Leasehold Improvements/Misc. Property</b>			<b>12,600.00</b>

<b>Total Assests</b>	<b>47,700.00</b>
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# 50. Restaurant Machinery & Equipment

## TX-1750

### Section 3 - Machinery & Equipment

1	Smoker	2018	7,800.00
2	Hood	2018	3,500.00
3	Walk-in Refrigerator	2018	2,500.00
4	Clymate IQ Heated Ca	2018	3,000.00
5	Nugget Ice Maker	2018	3,000.00
6	Restaurant Equipment	2018	7,500.00
7	Serving Line	2018	4,500.00
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b><u>33,800.00</u></b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	<u>18,590.00</u>
<b>Leasehold Improvements/Misc. Property</b>			<b><u>18,590.00</u></b>

<b>Total Assests</b>	<b>52,390.00</b>
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# 50. Restaurant Machinery & Equipment

## TX-2030

### Section 3 - Machinery & Equipment

1	Smoker	2018	9,000.00
2	Hood	2018	-
3	Walk-in Refrigerator	2018	-
4	Clymate IQ Heated Ca	2018	3,000.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	8,500.00
7	Serving Line	2018	-
8	Beverage Bar	2018	-
9	Technology In a Box (T	2018	500.00
<b>Machinery &amp; Equipment (Sub-total)</b>			<b>22,500.00</b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	8,900.00
<b>Leasehold Improvements/Misc. Property</b>			<b>8,900.00</b>

**Total Assests** **31,400.00**



# 50. Restaurant Machinery & Equipment

## TX-2034

### Section 3 - Machinery & Equipment

1	Smoker	2018	12,000.00
2	Hood	2018	-
3	Walk-in Refrigerator	2018	-
4	Clymate IQ Heated Ca	2018	3,500.00
5	Nugget Ice Maker	2018	1,500.00
6	Restaurant Equipment	2018	24,000.00
7	Serving Line	2018	-
8	Beverage Bar	2018	1,500.00
9	Technology In a Box (T	2018	500.00
	<b>Machinery &amp; Equipment (Sub-total)</b>		<b>43,000.00</b>

### Section 4 - Leasehold Improvements/Misc. Property

1	Furniture and Fixtures	2018	26,500.00
	<b>Leasehold Improvements/Misc. Property</b>		<b>26,500.00</b>

<b>Total Assests</b>	<b>69,500.00</b>
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**Fill in this information to identify the case:**

Debtor name Smokinkwr LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 21-33989

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

**12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
--	--

<b>2.1</b>	<b>Creditor's name</b> <u>Bell County</u>	<b>Describe debtor's property that is subject to a lien</b> <u>INVENTORY, FURNITURE, EQUIPMENT, BBQ</u>	<b>\$467.71</b>	<b>\$0.00</b>
	<b>Creditor's mailing address</b> <u>c/o McCreary, Veselka, Bragg &amp; Allen</u>	<b>Describe the lien</b> <u>Statutory Lien</u>		
	<b>P.O. Box</b> <u>1269</u>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Round Rock TX 78680-1269</b>	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Creditor's email address, if known</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Date debt was incurred</b> <u>2021</u>			
	<b>Last 4 digits of account number</b> <u>1 0 6 7</u>			
	<b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.			

11824 FM 2305, Belton, Texas 76513-5434

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

**\$1,646,808.03**

DS  
BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

**Column A**  
Amount of claim  
Do not deduct the  
value of collateral.

**Column B**  
Value of collateral  
that supports  
this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.2</b>	<b>Creditor's name</b> <u>Brazoria County Tax Assessor-Collecto</u>  <b>Creditor's mailing address</b> <u>c/o Michael J. Darlow</u> <u>Purdue Brandon Fielder Collins</u> <u>1235 North Loop West #600</u> <u>Houston TX 77008</u>  <b>Creditor's email address, if known</b> <u>mdarlow@pbfc.com</u>  <b>Date debt was incurred</b> <u>2021</u>  <b>Last 4 digits of account number</b> <u>0 0 2 2</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>FURN FIXT EQUIP INV OTHER PERSONAL</u>  <b>Describe the lien</b> <u>Property Taxes / Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,786.16</b>	<b>\$20,000.00</b>
<b>2.3</b>	<b>Creditor's name</b> <u>City of Waco &amp; Waco ISD</u>  <b>Creditor's mailing address</b> <u>c/o McCreary, Veselka, Bragg &amp; Allen, P</u> <u>P.O. Box 1269</u>  <u>Round Rock TX 78680-1269</u>  <b>Creditor's email address, if known</b> <u>tleday@mvalaw.com</u>  <b>Date debt was incurred</b> <u>2021</u>  <b>Last 4 digits of account number</b> <u>7 8 5 0</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>MERCH INV, SUP, FFE</u>  <b>Describe the lien</b> <u>Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$1,172.96</b>	<b>\$0.00</b>

3840 Eagles Nest Trl, Burleson, Texas 76028-3643

DS  
BMA

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.4</b>	<b>Creditor's name</b> <b>Cloud Fund LLC</b>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables, Equipment</b>	<b>\$170,729.00</b>	<b>\$958,548.09</b>
	<b>Creditor's mailing address</b> <b>400 Rella Blvd, #165-101</b>	<b>Describe the lien</b> <b>Agreement</b>		
	<b>Suffern NY 10901</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Date debt was incurred</b> <b>10/6/2021</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Last 4 digits of account number</b>			
	<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.			

For Card Account Receivables held by Chase Merchant Bank: 1) US FOODS INC; 2) Everest Business Funding; 3) Fox Capital Group Inc; 4) Roc Funding Group; 5) Cloud Fund LLC; 6) Overnight Capital; 7) Forward Financing, LLC; 8) Wynwood Capital Group LLC; 9) Spark Funding LLC. For Credit Card Accounts Receivables held by GrubHub : 1) US FOODS INC; 2) Everest Business Funding; 3) Fox Capital Group Inc; 4) Roc Funding Group; 5) Cloud Fund LLC; 6) Overnight Capital; 7) Forward Financing, LLC; 8) Wynwood Capital Group LLC; 9) Spark Funding LLC. For Credit Card Accounts Receivables held by DoorDash, Inc: 1) US FOODS INC; 2) Everest Business Funding; 3) Fox Capital Group Inc; 4) Roc Funding Group; 5) Cloud Fund LLC; 6) Overnight Capital; 7) Forward Financing, LLC; 8) Wynwood Capital Group LLC; 9) Spark Funding LLC. For Credit Card Account Receivables held by Square Merchant Serv: 1) US FOODS INC; 2) Everest Business Funding; 3) Fox Capital Group Inc; 4) Roc Funding Group; 5) Cloud Fund LLC; 6) Overnight Capital; 7) Forward Financing, LLC; 8) Wynwood Capital Group LLC; 9) Spark Funding LLC. For Store Inventory-See Attached: 1) US FOODS INC; 2) Fox Capital Group Inc; 3) Roc Funding Group; 4) Cloud Fund LLC; 5) Overnight Capital; 6) Forward Financing, LLC; 7) Spark Funding LLC. For Restaurant Machinery & Equipment: \$485,642.99 Furniture & Fiextures: \$201,825.00 See Attached List: 1) US FOODS INC; 2) Fox Capital Group Inc; 3) Roc Funding Group; 4) Cloud Fund LLC; 5) Overnight Capital; 6) Forward Financing, LLC; 7) Spark Funding LLC.

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

DS  
 BMH

Debtor **Smokinkwr LLC**

Case number (if known) **21-33989**

**Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

*Column A*  
**Amount of claim**  
Do not deduct the value of collateral.

*Column B*  
**Value of collateral that supports this claim**

<b>2.5</b>	<b>Creditor's name</b> <b>Collin County Tax Assessor</b>  <b>Creditor's mailing address</b> <b>2300 Bloomdale Rd. Ste 2324</b>  <b>McKinney TX 75071</b>  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> <b>2021</b>  <b>Last 4 digits of account number</b> <b>5   6   5   1</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <b>Business Personal Property</b>  <b>Describe the lien</b> <b>Property Taxes / Statutory Lien</b>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,725.06</b>	<b>\$79,885.00</b>
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<b>2.6</b>	<b>Creditor's name</b> <b>Cypress-Fairbanks ISD Tax Collector</b>  <b>Creditor's mailing address</b> <b>10494 Jones Rd #106</b>  <b>Houston TX 77065</b>  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> <b>2015-2021</b>  <b>Last 4 digits of account number</b> <b>5   9   7   1</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <b>Business Personal Property</b> <b>CMP F&amp;F INV M&amp;E</b>  <b>Describe the lien</b> <b>Property Taxes / Statutory Lien</b>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,906.96</b>	<b>\$10,000.00</b>
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6184 Highway 6 N Store

DS  
BMA

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.7</b>	<b>Creditor's name</b> <b>Dallas County Tax Office</b>  <b>Creditor's mailing address</b> <b>PO Box 139066</b>   <b>Dallas TX 75313-9066</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>Various</u> <b>Last 4 digits of account number</b> <u>0 0 0 0</u> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <b>Business Personal Property</b> <b>Describe the lien</b> <b>Property Taxes / Statutory Lien</b> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,164.54</b>	<b>\$20,000.00</b>
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<b>2.8</b>	<b>Creditor's name</b> <b>Dallas County Tax Office</b>  <b>Creditor's mailing address</b> <b>PO Box 139066</b>   <b>Dallas TX 75313-9066</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>Various</u> <b>Last 4 digits of account number</b> <u>8 1 9 4</u> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <b>Business Personal Property</b> <b>Describe the lien</b> <b>Property Taxes / Statutory Lien</b> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,800.63</b>	<b>\$20,000.00</b>
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DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.9</b>	<b>Creditor's name</b> <b>Everest Business Funding</b>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables</b>	<b>\$232,825.00</b>	<b>\$208,391.54</b>
	<b>Creditor's mailing address</b> <b>5 West 37th St, #110</b>	<b>Describe the lien</b> <b>Agreement</b>		
	<b>New York NY 10018</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Date debt was incurred</b> <b>8/2/2021</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Last 4 digits of account number</b>			
	<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <b>2.4</b>			

<b>2.10</b>	<b>Creditor's name</b> <b>Forward Financing, LLC</b>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables, Equipment, Inventory10</b>	<b>\$120,000.00</b>	<b>\$958,548.09</b>
	<b>Creditor's mailing address</b> <b>53 State St, 20th Floor</b>	<b>Describe the lien</b> <b>Agreement</b>		
	<b>Boston MA 02109</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Date debt was incurred</b> <b>10/13/2021</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Last 4 digits of account number</b>			
	<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <b>2.4</b>			

DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral**  
 that supports  
 this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.11	<b>Creditor's name</b> <b>Fox Capital Group Inc</b>  <b>Creditor's mailing address</b> <b>140 BROADWAY, 46TH FL</b>   <b>NEW YORK NY 10005</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>8/20/2021</u> <b>Last 4 digits of account number</b> _____ <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.4</u>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivable, Equipment, Inventory</b> <b>Describe the lien</b> <b>Merchant Cash Advance / Agreement</b> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$150,750.00</b>	<b>\$958,548.09</b>
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2.12	<b>Creditor's name</b> <b>Galveston County Tax Assessor</b>  <b>Creditor's mailing address</b> <b>600 59th St</b>   <b>Galveston TX 77551</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>2021</u> <b>Last 4 digits of account number</b> <u>9 0 7 5</u> <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <b>BUSINESS PERSONAL PROPERTY-INV, SUP &amp;</b> <b>Describe the lien</b> <b>Property Taxes / Statutory Lien</b> <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,770.40</b>	<b>\$20,000.00</b>
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DS  
 BMA



Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.13</b>	<b>Creditor's name</b> <u>Hardin County</u>  <b>Creditor's mailing address</b> <u>c/o McCreary, Veselka, Bragg &amp; Allen</u> <u>P.O. Box 1269</u>  <u>Round Rock TX 78680-1269</u>  <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>2021</u>  <b>Last 4 digits of account number</b> <u>0 0 0 0</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>FF&amp;E</u>  <b>Describe the lien</b> <u>Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$600.50</u>	<u>\$0.00</u>
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**795 S Main St Ste B, Lumberton, Texas 77657-7380**

<b>2.14</b>	<b>Creditor's name</b> <u>Harris County</u>  <b>Creditor's mailing address</b> <u>c/o Linebarger Goggan Blair &amp; Sampson</u> <u>PO Box 3064</u>  <u>Houston TX 77253-3064</u>  <b>Creditor's email address, if known</b> <u>houston_bankruptcy@publicans.com</u>  <b>Date debt was incurred</b> <u>Various</u>  <b>Last 4 digits of account number</b> _____  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>Business Personal Property</u>  <b>Describe the lien</b> <u>Taxes / Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$14,896.25</u>	<u>\$50,000.00</u>
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DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.15</b>	<b>Creditor's name</b> <u>Harris County MUD #102</u>  <b>Creditor's mailing address</b> <u>c/o Carl O. Sandin</u> <u>1235 North Loop West</u>  <u>Houston TX 77008</u>  <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>Various</u>  <b>Last 4 digits of account number</b> <u>8 5 6 0</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>Business Personal Property</u>  <b>Describe the lien</b> <u>Property Taxes / Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,812.69</u>	<u>\$20,000.00</u>
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<b>2.16</b>	<b>Creditor's name</b> <u>Henderson County</u>  <b>Creditor's mailing address</b> <u>c/o McCreary, Veselka, Bragg &amp; Allen</u> <u>P.O. Box 1269</u>  <u>Round Rock TX 78680-1269</u>  <b>Creditor's email address, if known</b> <u>tleday@mvbalaw.com</u>  <b>Date debt was incurred</b> <u>2021</u>  <b>Last 4 digits of account number</b> <u>9 0 1 0</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>BUSINESS PERSONAL PROPERTY</u>  <b>Describe the lien</b> <u>Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$754.47</u>	<u>\$0.00</u>
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**220 S PALESTINE**

DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

<b>2.17</b>	<b>Creditor's name</b> <u>Johnson County Tax Assessor</u>  <b>Creditor's mailing address</b> <u>PO Box 75</u>  <u>Cleburne TX 76033</u>  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> <u>2020-2021</u>  <b>Last 4 digits of account number</b> <u>7 5 8 4</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>Business Personal Property</u>  <b>Describe the lien</b> <u>Property Taxes / Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,242.56</u>	<u>\$20,000.00</u>
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<b>2.18</b>	<b>Creditor's name</b> <u>Midland Central Appraisal District</u>  <b>Creditor's mailing address</b> <u>c/o McCreary, Veselka, Bragg &amp; Allen, P</u> <u>P.O. Box 1269</u>  <u>Round Rock TX 78680-1269</u>  <b>Creditor's email address, if known</b> <u>tleday@mvybalaw.com</u>  <b>Date debt was incurred</b> <u>2021</u>  <b>Last 4 digits of account number</b> <u>6 3 3 7</u>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Describe debtor's property that is subject to a lien</b> <u>FURNITURE &amp; FIXTURES, MACHINERY &amp; EQUIPMENT</u>  <b>Describe the lien</b> <u>Statutory Lien</u>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,709.28</u>	<u>\$0.00</u>
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**Midland County:**  
 -2212 Rankin Hwy (2021: \$1,216.39)  
 -5210 Wadley (2021: \$544.17)  
 -600 W Wadley (2021: \$948.72)

DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.19****Creditor's name****Montgomery County****Describe debtor's property that is subject to a lien****\$27,484.72****\$0.00****Creditor's mailing address****c/o Linebarger Goggan Blair & Sampson****Inv/Furn/Fixt/Equip****PO Box 3064****Describe the lien****Ad Valrem Taxes / Statutory Lien****Houston TX 77253-3064****Is the creditor an insider or related party?**☒ No☐ Yes**Creditor's email address, if known****houston\_bankruptcy@lgbs.com****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**Date debt was incurred** **Various****Last 4 digits of account number****As of the petition filing date, the claim is:**

Check all that apply.

**Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_☐ Contingent☐ Unliquidated☐ Disputed**Stores:****1216 N Loop W #M (2015-2017: \$11,967.15)****10700 Kuykendahl, Rd #A (2021: \$662)****25919 I-45 N #A (2014: \$7,159.56)****2222 Rayford Rd #105 (2020: \$4,633.47; 2021: \$2,989.36)****22510 Hwy 59 S (2021: \$358.36)**

DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.20</b>	<b>Creditor's name</b> <b>Overnight Capital</b>  <b>Creditor's mailing address</b> <b>124-17 Metorpolitian Captial Group, Inc</b>   <b>New Gardens NY 11415</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>10/6/2021</u> <b>Last 4 digits of account number</b> _____ <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.4</u>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables, Equipment, Inventory</b> <b>Describe the lien</b> <b>Agreement</b>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$166,786.00</b>	<b>\$958,548.09</b>
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<b>2.21</b>	<b>Creditor's name</b> <b>Roc Funding Group</b>  <b>Creditor's mailing address</b> <b>1437 Richmond Rd</b>   <b>Staten Island NY 10304</b> <b>Creditor's email address, if known</b>   <b>Date debt was incurred</b> <u>9/22/2021</u> <b>Last 4 digits of account number</b> _____ <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.  <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.4</u>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables, Equipment, Inventory</b> <b>Describe the lien</b> <b>Agreement</b>  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<b>\$168,254.00</b>	<b>\$958,548.09</b>
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DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.22</b>	<b>Creditor's name</b> <b>Spark Funding LLC</b>	<b>Describe debtor's property that is subject to a lien</b> <b>Accounts Receivables, Equipment, Inventory</b>	<b>\$51,520.00</b>	<b>\$958,548.09</b>
	<b>Creditor's mailing address</b> <b>dba Fundamental Capital</b> <b>100 Garden City Plaza, #410</b>	<b>Describe the lien</b> <b>Agreement</b>		
	<b>Garden City NY 11530</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Date debt was incurred</b> <b>10/29/2021</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Last 4 digits of account number</b>			
	<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <b>2.4</b>			
<b>2.23</b>	<b>Creditor's name</b> <b>Tarrant County Tax Assessor</b>	<b>Describe debtor's property that is subject to a lien</b> <b>Restaurant Machinery &amp; Equipment</b>	<b>\$6,417.15</b>	<b>\$50,000.00</b>
	<b>Creditor's mailing address</b> <b>100 E Weatherford</b>	<b>Describe the lien</b> <b>Property Taxes</b>		
	<b>Ft Worth TX 76196</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<b>Date debt was incurred</b> <b>Various</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Last 4 digits of account number</b> <b>1 4 5 9</b>			
	<b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines			

DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.24</b>	<b>Creditor's name</b> <b>US FOODS INC</b>	<b>Describe debtor's property that is subject to a lien</b> <b>\$350,000.00</b>	<b>\$958,548.09</b>
	<b>Creditor's mailing address</b> <b>PO BOX 840396</b>	<b>Accounts, Goods, Inventory, Equipment, Fixtures, V</b>	
		<b>Describe the lien</b> <b>Food Supplier / Agreement</b>	
	<b>DALLAS TX 75284-0396</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	<b>Creditor's email address, if known</b>	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	
	<b>Date debt was incurred</b> <b>7/6/2021</b>		
	<b>Last 4 digits of account number</b> <b>1 9 9 2</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <b>2.4</b>		

<b>2.25</b>	<b>Creditor's name</b> <b>Williamson County</b>	<b>Describe debtor's property that is subject to a lien</b> <b>\$725.99</b>	<b>\$0.00</b>
	<b>Creditor's mailing address</b> <b>c/o McCreary, Veselka, Bragg &amp; Allen, P</b>	<b>BUSINESS PERSONAL PROPERTY</b>	
	<b>PO Box 1269</b>	<b>Describe the lien</b> <b>Statutory Lien</b>	
	<b>Round Rock TX 78680-1269</b>	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	<b>Creditor's email address, if known</b> <b>tleday@mvalaw.com</b>	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	
	<b>Date debt was incurred</b> <b>2021</b>		
	<b>Last 4 digits of account number</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines		

**Store in Williamson County:**  
**661 LOUIS HENNA BLVD #330**

DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 1: Additional Page**

*Column A*  
**Amount of claim**  
 Do not deduct the  
 value of collateral.

*Column B*  
**Value of collateral  
 that supports  
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.26****Creditor's name****Wynwood Capital Group LLC****Describe debtor's property that is subject to a lien****\$158,506.00****\$208,391.54****Creditor's mailing address****20200 W Dixie Highway****Accounts Receivables****Describe the lien****Merchant Cash Advance / Agreement****Miami FL 33180****Is the creditor an insider or related party?**☒ No☐ Yes**Creditor's email address, if known****Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**Date debt was incurred** **11/18/2021****Last 4 digits of account number****As of the petition filing date, the claim is:**

Check all that apply.

**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ Contingent☐ Unliquidated☒ Disputed☐ No. Specify each creditor, including this creditor, and its relative priority.☒ Yes. The relative priority of creditors is specified on lines **2.4**

DS  
 BMH



Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<b>Amy Dunn</b> 500 Lovett Blvd, Ste 225 Houston TX 77006	Line <b>2.21</b>	_____
<b>Brandon J. Gibbons</b> PADFIELD & STOUT, L.L.P 420 Throckmorton St, Ste 1210 Fort Worth TX 76102	Line <b>2.9</b>	_____
<b>Brian L. Shaw</b> Cozen O'Connor 123 North Wacker Drive, Suite 1800 Chicago IL 60606	Line <b>2.24</b>	_____
<b>Gene W. Rosen</b> Gene Rosen's Law Firm 200 Garden City Plaza, Ste 405 Garden City NY 11530	Line <b>2.26</b>	_____
<b>Joe Lieberman</b> Lieberman and Klestzick, LLP 71 S. Central Ave, Suite 200 Valley Stream NY 11580	Line <b>2.11</b>	_____
<b>Keith Wier</b> MAURICE WUTSCHER, LLP 5851 Legacy Circle, Suite 600 Plano TX 75024	Line <b>2.22</b>	_____

DS  
BMA

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1 -- Continuation Page**

Name and address

On which line in Part 1  
did you enter the  
related creditor?Last 4 digits of  
account number  
for this entity**Linebarger Goggan Blair & Sampson, LLP**Line **2.19****PO Box 3064****Houston****TX****77253-3064****Linebarger Goggan Blair & Sampson, LLP**Line **2.6****PO Box 3064****Houston****TX****77253-3064****Marla S. Benedek**Line **2.24****Cozen O'Connor****1201 N. Market St., Ste 1001****Wilmington****DE****19801****Owen M. Sonik**Line **2.2****Perdue, Brandon, Fielder, Collins****1235 North Loop West, #600****Houston****TX****77008****Shanna M. Kaminski**Line **2.11****Kaminski Law, PLLC****PO Box 725220****Berkley****MI****48072**


Fill in this information to identify the case:

Debtor Smokinkwr LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 21-33989

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim	Priority amount
<u>Unknown</u>	<u>Unknown</u>

2.1 Priority creditor's name and mailing address

Internal Revenue Service

PO Box 7346

Philadelphia PA 19101-7346

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( 8 )

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:  
1040 Taxes

Is the claim subject to offset?

- ☒ No
- ☐ Yes

2.2 Priority creditor's name and mailing address

Texas Comptroller of Public Accounts

PO Box 12548

MC-008

Austin TX 78711

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( 8 )

As of the petition filing date, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:  
Sales Taxes

Is the claim subject to offset?

- ☒ No
- ☐ Yes

<u>Unknown</u>	<u>Unknown</u>
----------------	----------------

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.1</div> Nonpriority creditor's name and mailing address <u>Alert 360</u> <u>2448 East 81st St, Ste 4200</u>  <u>Tulsa</u> <u>OK</u> <u>74137</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Burglar Alarm</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,048.72</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.2</div> Nonpriority creditor's name and mailing address <u>Amrinder LLC</u> <u>10600 Fondren Rd</u>  <u>Houston</u> <u>TX</u> <u>77096</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Rent</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,000.00</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.3</div> Nonpriority creditor's name and mailing address <u>ARC STX</u> <u>1st Source Restaurant Services, Inc</u> <u>665 E Jones St</u>  <u>Lewisville</u> <u>TX</u> <u>75057</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Merchandise</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,117.00</u>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 10px;">3.4</div> Nonpriority creditor's name and mailing address <u>Armish LLC</u> <u>1221 Saint Emilion</u>  <u>Southlake</u> <u>TX</u> <u>76092</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Rent</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$12,000.00</u>

 DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.5</div> Nonpriority creditor's name and mailing address <u>AT&amp;T</u> <u>PO BOX 5014</u>  <u>Carol Stream</u> <u>IL</u> <u>60197-5014</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>    </u> <u>    </u> <u>    </u> <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Telephone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,200.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.6</div> Nonpriority creditor's name and mailing address <u>AW Billing Services LLC</u> <u>4431 N Dixie Highway</u>  <u>Boca Raton</u> <u>FL</u> <u>33431</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5</u> <u>5</u> <u>8</u> <u>6</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,348.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.7</div> Nonpriority creditor's name and mailing address <u>Barri Financial Group</u> <u>9800 Centre Pkwy</u> <u>Collections Desk</u>  <u>Houston</u> <u>TX</u> <u>77036</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>    </u> <u>    </u> <u>    </u> <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Retruned Checks</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,359.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.8</div> Nonpriority creditor's name and mailing address <u>Brian Michael Hubbard</u> <u>2124 Rope Maker Rd</u>  <u>Conroe</u> <u>TX</u> <u>77384</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>    </u> <u>    </u> <u>    </u> <u>    </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investment in Debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>

 DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <u>Brothers Produce</u> <u>PO Box 1207</u>  <u>Frinedswood TX 77549</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Produce</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$748.18</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <u>Cantu Fire Safety</u>    Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Equipment</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$435.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <u>Champion Energy</u> <u>PO BOX 4190</u> <u>Houston, TX 772210-4190</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,500.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <u>ChemMark of Dallas</u> <u>8290 FM 2727</u>  <u>Terrell TX 75161</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>1</u> <u>1</u> <u>7</u> <u>4</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Sanitation Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,974.00</u>

 DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.13</div> Nonpriority creditor's name and mailing address  <u>ChemMark of Houston</u> <u>6531 Petropark Drive</u>  <u>Houston TX 77041</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Sanitation Services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,877.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.14</div> Nonpriority creditor's name and mailing address  <u>Cirro Energy</u> <u>PO Box 2229</u>  <u>Houston TX 77252-2229</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Utilities</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$100.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.15</div> Nonpriority creditor's name and mailing address  <u>City of Houston</u> <u>Burglar Alarm Administration</u> <u>PO Box 203887</u>  <u>Houston TX 77216-3887</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>1</u> <u>5</u> <u>8</u> <u>2</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Burglar Alarm</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,128.90</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.16</div> Nonpriority creditor's name and mailing address  <u>Coca-Cola North Amerlca</u> <u>PO BOX 102703</u>  <u>ATLANTA GA 30368</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>8</u> <u>6</u> <u>3</u> <u>4</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Beverage Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,391.00</u>

 DS  
 BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.17</div> Nonpriority creditor's name and mailing address <b>Coca-Cola Southwest Beverages LLC</b> <b>PO Box:744010</b>  <b>ATLANTA GA 30384-4010</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Beverage Vendor</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.18</div> Nonpriority creditor's name and mailing address <b>Comet Signs</b> <b>PO Box 2229</b>  <b>Houston TX 77252-2229</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Signs</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,200.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.19</div> Nonpriority creditor's name and mailing address <b>Divvy</b> <b>13707 S 200 W Suite 100</b>  <b>Draper UT 84020</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Merchandise</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,000.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div> Nonpriority creditor's name and mailing address <b>DoorDash, Inc.</b> <b>303 2nd Street</b> <b>South Tower</b>  <b>San Francisco CA 94107</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Delivery Service</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,092.00</b>

 DS  
 BMT



Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.21</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Fluid Solutions</b> <b>PO BOX 1978</b>  <b>Mansfield TX 76063</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Services</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,000.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.22</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Form Center</b> <b>231 Croton Ave</b>  <b>Cortlandt Manor NY 10567</b>  Date or dates debt was incurred _____ Last 4 digits of account number <u>4</u> <u>2</u> <u>9</u> <u>2</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Bank Check Vendor</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$951.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.23</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Greenlight Services Inc</b> <b>PO Box 1813</b>  <b>Cypress TX 77410</b>  Date or dates debt was incurred _____ Last 4 digits of account number <u>5</u> <u>7</u> <u>2</u> <u>3</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Windows Cleaning</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$427.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.24</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Harris County Alarm Detail</b> <b>9418 Jensen Drive, Suite A</b>  <b>Houston TX 77093-6821</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Alarm Service</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$750.00</b>

 DS  
 BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.25</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Info-Hold Inc DBA United Media Solution</b> <b>4120 Airport Road</b>  <b>Cincinnati OH 45226</b>  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number</b> <u>Q</u> <u>4</u> <u>2</u> <u>6</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Digital Signature Equipment</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.26</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>JPMorgan Chase Bank NA</b> <b>s/b/m/t Chase Bank USA, NA</b> <b>c/o Robertson, Anschutz &amp; Schneid</b> <b>6409 Congress Ave, #100</b> <b>Boca Raton FL 33487</b>  <b>Date or dates debt was incurred</b> <b>11/9/2021</b>  <b>Last 4 digits of account number</b> <u>8</u> <u>4</u> <u>1</u> <u>6</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Credit Card</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,944.73</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.27</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Keter Environmental Services</b> <b>PO BOX 417468B</b>  <b>Boston MA 02241-7468</b>  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number</b> <u>5</u> <u>0</u> <u>0</u> <u>7</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Waste Disposal</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,071.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>3.28</b></div> <b>Nonpriority creditor's name and mailing address</b> <b>Metro Linen Service</b> <b>PO Box 978</b>  <b>McKinney TX 75070</b>  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number</b> <u>0</u> <u>0</u> <u>0</u> <u>4</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Linen Service</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,446.00</b>

DS  


Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.


Amount of claim

<b>3.29</b> Nonpriority creditor's name and mailing address <u>Patrice &amp; Associates Franchising</u> <u>3140 W Ward Rd #202</u>  <u>Dunkirk</u> <u>MD</u> <u>20754</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Employee Recruiter</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,640.00</u>
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<b>3.30</b> Nonpriority creditor's name and mailing address <u>PLS Check Cashiers of Texas, LP</u> <u>800 Jorie Blvd, #200</u>  <u>Oak Brook</u> <u>IL</u> <u>60523</u>  Date or dates debt was incurred <u>11/9/2021</u> Last 4 digits of account number <u>  2  </u> <u>  7  </u> <u>  0  </u> <u>  9  </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Returned Checks</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$17,450.13</u>
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<b>3.31</b> Nonpriority creditor's name and mailing address <u>RGI BUILDING MAINTENANCE, LLC</u> <u>d/b/a GOLD STAR SERVICES</u> <u>PO BOX 544</u>  <u>SUGAR LAND</u> <u>TX</u> <u>77487</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u> 12/16/21 Call from Sherry at Gold Star, re: Amount Owed	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Building Maintenance</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,059.38</u>
--	---	-------------------

<b>3.32</b> Nonpriority creditor's name and mailing address <u>Smokey Bites</u> <u>c/o Patterson, Boyd Lowery</u> <u>1201 Louisiana</u>  <u>Houston</u> <u>TX</u> <u>77002</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>  d  </u> <u>  c  </u> <u>  o  </u> <u>  m  </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Merchandise</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$21,412.80</u>
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DS  


Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> Nonpriority creditor's name and mailing address <b>TAALVI LLC</b> <b>3221 West 4th St</b>  <b>Ft Worth TX 76107</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Rent</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,500.00</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> Nonpriority creditor's name and mailing address <b>Tony Hubbard</b> <b>2124 Rope Maker Rd</b>  <b>Conroe TX 77384</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Investment in Debtor</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> Nonpriority creditor's name and mailing address <b>TXU ENERGY</b> <b>P.O. BOX 650638</b>  <b>DALLAS TX 75265-0638</b>  Date or dates debt was incurred _____ Last 4 digits of account number <u>4</u> <u>7</u> <u>2</u> <u>2</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Utilities</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$35,000.00</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> Nonpriority creditor's name and mailing address <b>United Media Solution</b> <b>4120 Airport Rd</b>  <b>Cincinnati OH 45226</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Equipment</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,000.00</b>
--	---	-------------------

DS  
BMT

Debtor Smokinkwr LLCCase number (if known) 21-33989**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.37	Nonpriority creditor's name and mailing address
------	---

As of the petition filing date, the claim is:

\$4,394.00

Check all that apply.

Yellow Dog Software☐ Contingent965 Norfolk Square☐ Unliquidated☐ Disputed

Basis for the claim:

Norfolk VA 23502Software Vendor

Date or dates debt was incurred \_\_\_\_\_

Is the claim subject to offset?

Last 4 digits of account number \_\_\_\_\_

☒ No☐ Yes


Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Mike Smiley</b> <b>Underwood Law Firm, PC</b> <b>PO Box 9158</b>  <b>Amarillo TX 79105-9158</b>	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: <b>Attorney for Hickman Investments &amp; HCRE</b>	____ _
4.2	<b>William C. Boyd</b> <b>Patterson, Boyd Lowery</b> <b>1201 Louisiana</b>  <b>Houston TX 77002</b>	Line <b>3.32</b> <input type="checkbox"/> Not listed. Explain:	____ _

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Debtor Smokinkwr LLCCase number (if known) 21-33989**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**5a. **Total claims from Part 1**5a. \$0.005b. **Total claims from Part 2**5b. **+** \$211,664.845c. **Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

5c. \$211,664.84DS  
BMT

**Fill in this information to identify the case:**

Debtor name Smokinkwr LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number 21-33989 Chapter 11  
(if known)

☐ Check if this is an amended filing

## Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Lease of Store 1379 at 9440 Shady Dr, Houston, Harris County, TX 77016 Contract to be ASSUMED	Arminder LLC 10101 Southwest Fwy, #200
	State the term remaining	9/1/2025	
	List the contract number of any government contract		Houston TX 77074
2.2	State what the contract or lease is for and the nature of the debtor's interest	Lease of Store 0426 at 6065 Sports Village Rd, Frisco, Collin County, TX 75033 Contract to be ASSUMED	Armish LLC c/o Gurmeet Kang, Manager 1221 Saint Emilion
	State the term remaining	12/31/2021	
	List the contract number of any government contract		Southlake TX 76092
2.3	State what the contract or lease is for and the nature of the debtor's interest	Lease: Store 0978: 6184 Hwy 6 N, Houston, Harris County, TX 77084 Contract to be ASSUMED	Brixmor Property Group c/o Norma Aleman 450 Lexington Ave, 13th Floor
	State the term remaining	1/31/2028	
	List the contract number of any government contract		New York NY 10017
2.4	State what the contract or lease is for and the nature of the debtor's interest	Food Truck Lease Contract to be ASSUMED	Food Truck
	State the term remaining		
	List the contract number of any government contract		



Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5	State what the contract or lease is for and the nature of the debtor's interest	Store #1748 Lease at Lowe's Shopping Center, 3807 E. Broad Street, Suite 125, Mansfield, Tarrant County, Texas Contract to be ASSUMED	Hickman Investments, Ltd HCRE, LLC 131 E Exchange Ave, #207			
	State the term remaining	12/17/2025				
	List the contract number of any government contract			Fort Worth	TX	76164
2.6	State what the contract or lease is for and the nature of the debtor's interest	Lease of Store 0774 532 Kingwood Dr, Kingwood, Harris County, TX 77339 Contract to be ASSUMED	KRG Kingwood Commons, LLC 32689 Collections Center Dr Chicago, IL 60693-03268			
	State the term remaining	10/7/2025				
	List the contract number of any government contract					
2.7	State what the contract or lease is for and the nature of the debtor's interest	Lease of Store 0003 at 2469 Dalworth St, Grand Prairie, Dallas County, TX 75050 Contract to be ASSUMED	Lil Smokies, LLC c/o Dale Blackburn 2108 Shoreline Circle			
	State the term remaining	12/31/2030				
	List the contract number of any government contract			Abilene	TX	78602
2.8	State what the contract or lease is for and the nature of the debtor's interest	Store 0347 Lease of Suite 126, 251 SW Wilshire Blvd., Burleson, Johnson County, Texas 76028 Contract to be ASSUMED	RBAS Properties III 6200 Southwest Blvd			
	State the term remaining	12/15/2025				
	List the contract number of any government contract			Fort Worth	TX	76109
2.9	State what the contract or lease is for and the nature of the debtor's interest	Lease of Store 0087 at 3711 Belt Line Rd, Addison, Dallas County, TX 75001 Contract to be ASSUMED	Remington Addison Plaza, LLC 8901 Governors Row			
	State the term remaining	March 31, 2026				
	List the contract number of any government contract			Dallas	TX	75247

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Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.10	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Ice Machine, etc Contract to be ASSUMED  Month to Month	Store Equipment Leases
2.11	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Lease of Store 1607 located at 11401 Broadway St, #107, Pearland, Brazoria County, TX 77584 Contract to be ASSUMED  3/1/2028	Taalvi LLC 5680 Hwy 6, #112   Missouri City TX 77459
2.12	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Insurance Contract to be ASSUMED	The Hartford P O Box 660916 Dallas, TX 75266-0916   Dallas TX 75266-0916
2.13	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Lease of Store 2034 at 17045 Stuebner Airline Rd, Spring, Harris County, TX 77379 Contract to be ASSUMED  1/30/2026	Theiss Investments LLC c/o Edward Jones ATTN: Jessica Jones 1400 Woodloch Forest Dr, #530  The Woodlands TX 77380
2.14	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining  List the contract number of any government contract	Lease of Store 1750 6608 Gulf Fwy, # 700, La Marque, Galveston County, TX 77568 Contract to be ASSUMED  5/8/2028	Weitzman Real Estate Services c/o Alisha Santos 1800 Bering Dr, Ste 550  Houston TX 77057

**Fill in this information to identify the case:**Debtor name **Smokinkwr LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF TEXAS**Case number  
(if known) **21-33989**☐ Check if this is an amended filing

## Official Form 206H

**Schedule H: Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.****1. Does the debtor have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

**Column 1: Codebtor****Column 2: Creditor***Check all schedules that apply:*

<b>Name</b>	<b>Mailing address</b>	<b>Name</b>	
<b>2.1 Brian Michael Hubbard</b>	<b>2124 Rope Maker Rd</b> Number Street	<b>Wynwood Capital Group LLC</b>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	<b>Conroe TX 77384</b> City State ZIP Code		
<b>2.2 Brian Michael Hubbard</b>	<b>2124 Rope Maker Rd</b> Number Street	<b>Everest Business Funding</b>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	<b>Conroe TX 77384</b> City State ZIP Code		
<b>2.3 Brian Michael Hubbard</b>	<b>2124 Rope Maker Rd</b> Number Street	<b>Fox Capital Group Inc</b>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	<b>Conroe TX 77384</b> City State ZIP Code		
<b>2.4 Brian Michael Hubbard</b>	<b>2124 Rope Maker Rd</b> Number Street	<b>Roc Funding Group</b>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	<b>Conroe TX 77384</b> City State ZIP Code		

DS  
BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: **Codebtor**Column 2: **Creditor**

Name	Mailing address	Name	Check all schedules that apply:
2.5 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Cloud Fund LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Overnight Capital	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.7 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Forward Financing, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Wynwood Capital Group LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Spark Funding LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	US FOODS INC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11 Brian Michael Hubbard	2124 Rope Maker Rd Number Street  Conroe TX 77384 City State ZIP Code	Arminder LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G

DS

BMH

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing address	Name	Check all schedules that apply:
2.12 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>Armish LLC</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.13 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>Brixmor Property Group</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.14 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>Hickman Investments, Ltd</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.15 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>KRG Kingwood Commons, LLC</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.16 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>Lil Smokies, LLC</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.17 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>RBAS Properties III</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	
2.18 Brian Michael Hubbard	<b>2124 Rope Maker Rd</b> Number Street <hr/> <b>Conroe TX 77384</b> City State ZIP Code	<b>Remington Addison Plaza, LLC</b> <input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G	

DS

BMT

Debtor **Smokinkwr LLC**Case number (if known) **21-33989****Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: **Codebtor**Column 2: **Creditor**

Name	Mailing address	Name	Check all schedules that apply:
2.19 Brian Michael Hubbard	2124 Rope Maker Rd Number Street	Store Equipment Leases	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
	Conroe TX 77384 City State ZIP Code		
2.20 Brian Michael Hubbard	2124 Rope Maker Rd Number Street	Taalvi LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
	Conroe TX 77384 City State ZIP Code		
2.21 Brian Michael Hubbard	2124 Rope Maker Rd Number Street	Weitzman Real Estate Services	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
	Conroe TX 77384 City State ZIP Code		

DS  
BMAH

**Fill in this information to identify the case:**Debtor Name Smokinkwr LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known): 21-33989☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from Schedule A/B..... **\$0.00****1b. Total personal property:**Copy line 91A from Schedule A/B..... **\$957,783.50****1c. Total of all property**Copy line 92 from Schedule A/B..... **\$957,783.50****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... **\$1,646,808.03****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of Schedule E/F..... **\$0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... **+ \$211,664.84****4. Total liabilities**Lines 2 + 3a + 3b..... **\$1,858,472.87**DS  
BMA

**Fill in this information to identify the case and this filing:**Debtor Name Smokinkwr LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number 21-33989  
(if known)**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 1/20/2022  
MM / DD / YYYY

DocuSigned by:

X

Brian M. Hubbard

Signature of individual signing on behalf of debtor

**Brian M. Hubbard**

Printed name

**Sole Member and Managing Member**

Position or relationship to debtor



**Fill in this information to identify the case:**Debtor name Smokinkwr LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number  
(if known) 21-33989☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/19**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply.Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2021 to

Filing date

☒ Operating a business  
☐ Other\$5,146,534.93

For prior year:

From 06/01/2020 to12/31/2020  
MM/DD/YYYY☒ Operating a business  
☐ Other\$345,754.00

For the year before that:

From 06/01/2019 to05/31/2020  
MM/DD/YYYY☒ Operating a business  
☐ Other\$0.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

Description of sources of revenue

Gross revenue  
from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2021 to

Filing date

For prior year:

From 01/01/2020 to12/31/2020  
MM/DD/YYYY

For the year before that:

From 01/01/2019 to12/31/2019  
MM/DD/YYYYDS  
BMT

Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
<b>3.1. Will Amend Later</b> Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____			<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity--within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
<b>7.1. Fox Capital Group, Inc v. Smokinkwr LLC et al</b>	<b>Suit on Merchant Capital Asset Contract</b>	<b>Supreme Court of NY State, Kings Co</b> Name <b>360 Adams St</b> Street <b>Kings County Civic Center</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>Case number</b> <b>530740/2021</b>		<b>Brooklyn</b> <b>NY</b> <b>11201</b> City State ZIP Code	

DS

BMA

Debtor	<b>Smokinkwr LLC</b>		Case number (if known)	<b>21-33989</b>
	Name			

<b>Case title</b>	<b>Nature of case</b>	<b>Court or agency's name and address</b>	<b>Status of case</b>
7.2. <b>ROC Funding Group LLC v. Smokinkwr LLC et al</b>	<b>Suit on Merchant Capital Asset Contract</b>	<b>Supreme Court of NY State-Ontario Co</b>	<input checked="" type="checkbox"/> Pending
		Name	<input type="checkbox"/> On appeal
		<b>27 North Main St</b>	<input type="checkbox"/> Concluded
		Street	
		<b>Ontario County Courthouse</b>	
<b>Case number</b>		<b>Canandauqua</b>	<b>NY 14424</b>
<b>131105-2021</b>		City	State ZIP Code

<b>Case title</b>	<b>Nature of case</b>	<b>Court or agency's name and address</b>	<b>Status of case</b>
7.3. <b>Wynwood Capital Group LLC v. Smokinkwr LLC et al</b>	<b>Suit on Merchant Capital Asset Agreement</b>	<b>Supreme Court of NY State-Nassau Co</b>	<input checked="" type="checkbox"/> Pending
		Name	<input type="checkbox"/> On appeal
		<b>100 Supreme Court Dr</b>	<input type="checkbox"/> Concluded
		Street	
<b>Case number</b>		<b>Mineola</b>	<b>NY 11501</b>
<b>614655-2021</b>		City	State ZIP Code

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.		
	List unpaid claims on Official Form 206A/B ( <i>Schedule A/B: Assets -- Real and Personal Property</i> ).		
<b>Smoker Fire: Will Amend</b>			

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Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

Who was paid or who received the transfer?	If not money, describe the property transferred	Dates	Total amount or value
11.1. <b>Thomas F. Jones III</b>		<b>12/82021</b>	<b>\$6,000.00</b>
<b>Address</b>			
<b>1770 St James Place, #105</b>			
Street			
<b>Houston TX 77056</b>			
City State ZIP Code			
<b>Email or website address</b>			
<b>tfjpacer@gmail.com</b>			
<b>Who made the payment, if not debtor?</b>			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

☒ None**13. Transfers not already listed on this statement**

List any transfers of money or other property--by sale, trade, or any other means--made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not applyDS  
BMH

Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- ☐ diagnosing or treating injury, deformity, or disease, or
- ☐ providing any surgical, psychiatric, drug treatment, or obstetric care?
- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained \_\_\_\_\_  
Does the debtor have a privacy policy about that information?  
☐ No.  
☐ Yes.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?  
☐ No. Go to Part 10.  
☐ Yes. Fill in below:

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts, certificates of deposit, and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

DS  
Bmt

Debtor **Smokinkwr LLC**  
Name

Case number (if known) **21-33989**

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?**

Include settlements and orders.

- ☒ No  
☐ Yes. Provide details below.

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No  
☐ Yes. Provide details below.

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No  
☐ Yes. Provide details below.

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

DS  
BMT

Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Dates of service**26a.1. **Wenah A. San Diego**From **2020** To **Present**

Name

**16310 Tomball Pkwy., Ste 204**

Street

**Houston****TX****77064**

City

State

ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None**Name and address****Dates of service**26b.1. **Tony Hubbard**From **6/1/2021** To **Present**

Name

**2124 Rope Maker Rd**

Street

**Conroe****TX****77384**

City

State

ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No.☐ Yes. Give the details about the two most recent inventories.**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
<b>Brian Hubbard</b>	<b>2124 Rope Maker Rd Conroe, TX 77384</b>	<b>Sole Manager / Sole Owner</b>	<b>100%</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
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DS  
BMT

Debtor **Smokinkwr LLC**  
NameCase number (if known) **21-33989****30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No  
☐ Yes. Identify below.

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No  
☐ Yes. Identify below.

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 1/20/2022  
 MM / DD / YYYY

DocuSigned by:

X

Brian M. HubbardPrinted name **Brian M. Hubbard**

Signature of individual signing on behalf of the debtor

Position or relationship to debtor **Sole Member and Managing Member**

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

- ☒ No  
☐ Yes